POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	-m		11/0 30 13
O.I.P.E. CLASSIFIER		211	1/0.25.00
FORMALITY REVIEW	EW	JC4949	11/25/00
RESPONSE FORMALITY REVIEW	55	573	03-23-01

INDEX OF CLAIMS

~	Rejected	N	Non-elected
=	Allowed	1	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

Claim Date	Claim	Date	Haim	Date
Final Conginal Conginal Conginal Conginal Conginal Conginal Congression Congre	Original 51	in i	TO1	
22110	52	┼┼╾┼╌┼╌┤╴├╴	102	
4 3 ~ / / /	53		103	
Ø 4 ∨ √ ∨ ₩ Ø 5 ∨ / ✓	54	 	105	
1 3 2 7 V/ V 	56		106	╎╎╎╎
6 0 V	57		107	
₹ 8 ∨ √ ∨ /	58		108	
\$ 9ViV /	59		109	++++++
10 10 V V V	60		110	╂┼┼┼┼
11-12-12	62		112	╎╎╎╎ ┼┼┼
N O V V V	63		113	
14 14 / 1/1/	64		. 114	
(S 15 V V) V	65		115	
10 16 0 0 0	66	- 	116	
17 18	68	╼ ┤╸ ┤╶┼╌┤	118	
19	69		119	
20	70		120	
21	71		121	
22	72		122	
23	73		123	╎╎╎╎ ┼┼┼┼
24	74	┈┤┤ ┼┼┼┼┼	124	╎╎╎┤┤
25	75	┈┩╌╏╶╏╸ ┩╴┠╴	126	┤╌┤┈╏┈╏╸
26 27	77		127	
328	78		128	
29	79		129	
30	80		130	┊ ╌╂╾╂╾╂╌
31	81	╏╸╏╶╏╸╏╶┩╸ ╏	131	╎╶┤╌┤╌╏╸
32	82 83	├┼┼┼┼┼	133	┦╌╿╌╿┈╿
33	84	╎╶╏╸ ┤╶╂╼┠╴╀╼┨ ┠╴	134	
35	85		135	┦┋┩┩
36 7	86		136	╽╶╽╺ ╂╌╂╾
374	87	╎ ╎ ┃	137	┧╸╂╸╂╸╏ ╶╂╸╂╸
38	88	┟╃╌╂╌╏ ╌╂╼┤╴┝	138	
40	90	╎┤╏ ┼┼┤	140	
41	91	├╶┼╶┼╌ ┼┤╴┝	141	
42	92	├┤ ┼┼┼┼┤	142	
43	93		143	╽╸ ┧╌┟╌╂╼╂╼╀╼
44	94		144	╶╏┈╏ ╾╂╼╂╾╂╾╋╾
45	95	┆┆┧ ┼┼┼┤┞	145	╶┧╌╁╸╂╸╂╸ ╋
46	96	╎╸╎╶╏╸╏╸╏╸╏ ╸┞	146	++++
47 48	97 98	╽╏╏╏ ┼┼┼┼┼┼┼┼┼┼┼┼	148	1-1-1-1-1
49	99	╏╸╽╴╏╸╏╶╏╸ ┫	149	TTAAA
50	100		150	1 1 1 1 1 1 1 1

If more than 150 claims or 10 actions staple additional sheet here

(LEFT INSIDE)